Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 1 of 64

Fill in this information to identify your c	ase:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

Ш	art I. Identify Toursen		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or	Michael First Name L Middle Name	Aileen First Name N Middle Name
	passport).	Johnson	Johnson
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		Aileen
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.		Maisonet Johnson
	maiden namee.	Last Name	Last Name
-	Only the last 4 digits of your Social Security	xxx - xx - <u>3</u> <u>4</u> <u>3</u> <u>5</u>	xxx - xx - <u>6</u> <u>8</u> <u>9</u> <u>7</u>
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 2 of 64

	otor 1 otor 2	Michael L Johnson Aileen N Johnson		Ca	se number (if known)	
			About Debtor 1:		About Debtor 2 (Sp	ouse Only in a Joint Case):
4.	and E	usiness names mployer	✓ I have not used	any business names or EINs.	✓ I have not used	any business names or EINs.
	(EIN) y	fication Numbers you have used in st 8 years	Business name		Business name	
	Include	le trade names and	Business name		Business name	
	doing	business as names	Business name		Business name	
			EIN		EIN	
			EIN		EIN	
5.	Where	e you live			If Debtor 2 lives at a	a different address:
			10218 W Mawma	n Ave.		
			Number Street		Number Street	
			Beach Park	IL 60087		
			City	State ZIP Code	City	State ZIP Code
			Lake County		County	
			County		County	
				ress is different from t in here. Note that the otices to you at this	from yours, fill it in	g address is different here. Note that the court to you at this mailing
			Number Street		Number Street	
			P.O. Box		P.O. Box	_
			City	State ZIP Code	City	State ZIP Code
6.		ou are choosing	Check one:		Check one:	
	bankrı			80 days before filing this lived in this district longer er district.		30 days before filing this lived in this district longer er district.
			I have another (See 28 U.S.C.	reason. Explain. § 1408.)	I have another (See 28 U.S.C.	reason. Explain. § 1408.)
Р	art 2:	Tell the Court Ab	out Your Bankrup	tcy Case		
7.	Bankr	hapter of the uptcy Code you loosing to file		ef description of each, see Notice 2010)). Also, go to the top of page 1		.C. § 342(b) for Individuals Filing opropriate box.
	under	_	Chapter 7			
			Chapter 11			
			Chapter 12			
			✓ Chapter 13			

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 3 of 64

		el L Johnson n N Johnson			Ca	nber (if known)				
8. How you will pay the fee			court pay v	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
				I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).						
				I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.						
9.	Have you filed			No						
	bankruptcy will last 8 years?	ithin the		Yes.						
			Dist	rict <u>N</u>	.D. Eastern Div., IL (ch. 13 discharg	When	09/30/2011 MM / DD / YYYY	Case number	11-40057	
			Dist	rict _		When	MM / DD / YYYY	Case number		
			Dist	rict _		When		Case number		
10.	Are any bankr			No						
	cases pending filed by a spor			Yes.						
	not filing this		Deb	tor _			Relationsh	ip to you		
	partner, or by affiliate?	er, or by an	Dist	rict _		When	MM / DD / YYYY			
			Deb	tor _			Relationsh	ip to you		
			Dist	rict _		When	MM / DD / YYYY	Case number, if known		
11.	Do you rent yo residence?	our		No. Yes.	Go to line 12. Has your landlord obtained an eviction juresidence?	ıdgmen	t against you an	d do you want to	o stay in your	
				No. Go to line 12. Yes. Fill out Initial Statement About and file it with this bankruptcy petitic		ction Judgment	Against You (Fo	orm 101A)		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 4 of 64

	tor 1 Michael L Johnson tor 2 Aileen N Johnson				Case no	umber (if known)		
Pa	Report About A	ny Bı	usine	sses You Own as	a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of b	pusiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Health Care Busi	e box to describe your buiness (as defined in 11 Lal Estate (as defined in 1 defined in 11 U.S.C. § 10 er (as defined in 11 U.S.	J.S.C. § 101(27A)) 1 U.S.C. § 101(51B)1(53A))	ZIP Co	ode
13.	13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a s <i>mall busin</i> ess		set ap st rece	opropriate deadlines. If nt balance sheet, stater	the court must know wh you indicate that you are ment of operations, cash- ot exist, follow the proce	e a small business of flow statement, and	debtor, you d federal in	must attach your scome tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under C	Chapter 11.			
	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	oter 11, but I am NOT a s	mall business debto	or accordir	ng to the definition in
	11 U.S.C. § 101(51D).		Yes.	. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Pa	art 4: Report If You Ov	vn o	r Hav	e Any Hazardous	Property or Any Pr	operty That Ne	eds Imn	nediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed, why is it need	ded?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	? Number Street			
					City		State	ZIP Code

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 5 of 64

Debtor 1	Michael L Johnson	
Debtor 2	Aileen N Johnson	Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

credit counseling because of:					
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making				

□ I am not required to receive a briefing about

rational decisions about finances. My physical disability causes me to be unable to participate in a

reasonably tried to do so.

 □ Disability. briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case): You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

П	I am not required to receive a briefing a	about
	credit counseling because of:	

☐ Incapacity.	I have a mental illness or a mental
_	deficiency that makes me

deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 6 of 64

		ael L Johnson en N Johnson				Case number (if	know	n)	
P	art 6: An	swer These Qu	uesti	ons for Reporting Pu	rpos	ses			
16.	What kind of have?	debts do you	16a.			sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."	
			16b.	16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17.					
			16c.	State the type of debts yo	u owe	e that are not consumer or bus	sines	s debts.	
17.	Are you filing Chapter 7?	j under	$\overline{\mathbf{V}}$	No. I am not filing under	Chap	ter 7. Go to line 18.			
	Do you estim any exempt p excluded and administrativ are paid that available for to unsecured	oroperty is I e expenses funds will be distribution		•	•	•	-	xempt property is excluded and to distribute to unsecured creditors?	
18.	How many cr you estimate owe?			1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.	How much do estimate you be worth?	•		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much do estimate you be?	•		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 7 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson		Case number (if known)				
Part 7:	Sign Below					
or you	_	I have examined this petition, and I declare unde and correct.	r penalty of perjury that the information provided is true			
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 1 or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choo proceed under Chapter 7.					
		If no attorney represents me and I did not pay or fill out this document, I have obtained and read the	agree to pay someone who is not an attorney to help me notice required by 11 U.S.C. § 342(b).			
		I request relief in accordance with the chapter of	title 11, United States Code, specified in this petition.			
		•	ng property, or obtaining money or property by fraud in ines up to \$250,000, or imprisonment for up to 20 years,			
		X /s/ Michael L Johnson	X /s/ Aileen N Johnson			
		Michael L Johnson, Debtor 1	Aileen N Johnson, Debtor 2			
		Executed on 03/25/2017	Executed on 03/25/2017			

MM / DD / YYYY

MM / DD / YYYY

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 8 of 64

Debtor 1 Debtor 2	Michael L Johnson Aileen N Johnson		_ Case number (if know	vn)
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		I, the attorney for the debtor(s) named in this eligibility to proceed under Chapter 7, 11, 12 relief available under each chapter for which the debtor(s) the notice required by 11 U.S.C certify that I have no knowledge after an inq is incorrect.	the person is eligible. I also C. § 342(b) and, in a case in	ates Code, and have explained the o certify that I have delivered to which § 707(b)(4)(D) applies,
		X /s/ Kenneth S. Borcia Signature of Attorney for Debtor	Date	03/25/2017 MM / DD / YYYY
		Kenneth S. Borcia Printed name Kenneth S. Borcia & Associates		
		Firm Name 1117 S. Milwaukee., Suite A-3 Number Street P.O. Box 447		
		F.O. BOX 447		
		Libertyville City	IL State	60048 ZIP Code
		Contact phone (847) 634-8800	Email address	
		3125988 Bar number	State	_

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 9 of 64

Fill in this info	ormation to ic	lentify your	case and this fili	ing:		
Debtor 1	Michael	L	Johnson			
	First Name	Middle Nam	me Last Name			
Debtor 2	Aileen First Name	N Middle Nam	Johnson			
(Spouse, if filing)	First Name	Milliale main	me Last Name			
United States Bar	nkruptcy Court for	the: NORTH	ERN DISTRICT OF	ILLINOIS		
Case number					☐ Check	c if this is an
(if known)						ded filing
Official Form	106A/B					
Schedule A/	B: Property	/				12/15
the asset in the ca filing together, bot sheet to this form.	ategory where yo th are equally res . On the top of a	ou think it fits b sponsible for s any additional p	best. Be as complete supplying correct info pages, write your nan	e and accurate as p formation. If more s me and case numb	set fits in more than one cat possible. If two married pe space is needed, attach a per (if known). Answer eve	eople are separate ery question.
Part 1: Des	scribe Each K	esidence, b	Juilding, Lana, or	Other Real Est	state You Own or Have	an Interest in
1. Do you own o	or have any legal	or equitable i	nterest in any reside	nce, building, land	d, or similar property?	
✓ No. Go to	o Part 2.					
	nere is the property	y?				
	•	-	for all of your entries t 1. Write that numbe		_	\$0.00
Part 2: Des	scribe Your Ve	ehicles				
		•	-		e registered or not? Include cutory Contracts and Unexpi	-
3. Cars, vans, tr	ucks, tractors, s	port utility ver	hicles, motorcycles			
□ No ☑ Yes						
3.1.			ho has an interest in t	the property?	Do not deduct secured clai	•
Make:	Chevy	Cne	neck one.		amount of any secured clair Creditors Who Have Claim	
Model:	Maliu	분	Debtor 1 only Debtor 2 only		Current value of the	Current value of the
Year:	2013	<u>□</u>	•	2 only	entire property?	portion you own?
Approximate mileag	je: <u>58,000</u>	— <u> </u>	At least one of the de		\$14,000.00	\$14,000.00
Other information: 2013 Chevy Mali miles)	iu (approx. 580	00 🗀	Check if this is com	nmunity property		
4. Watercraft, ai			,		nicles, and accessories	
✓ No ☐ Yes	dio, no,	10, po. 2.	illorary nog	10, 01101111111111111111111111111111111	ololoyala datezza	
	-	-	for all of your entries		ıding any →	\$14,000.00

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 10 of 64

	otor 1 Michael L Johnson otor 2 Aileen N Johnson Case number (if kno	wn)
P	art 3: Describe Your Personal and Household Items	
Do :	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware	
	No Yes. Describe (3) rooms of bedroom furniture, kitchen & living room furniture, mis household goods	c. \$750.00
7.	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, sca music collections; electronic devices including cell phones, cameras, media players, games	nners;
	 No ✓ Yes. Describe (4) televisions, (2) cell phones, x-box & games 	\$400.00
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art object stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	s;
	✓ No ☐ Yes. Describe	
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs canoes and kayaks; carpentry tools; musical instruments	, skis;
	✓ No Yes. Describe	
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes. Describe	
11.	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	No ✓ Yes. Describe clothing	\$100.00
12.	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watch gold, silver	hes, gems,
	□ No ☑ Yes. Describe Wedding ring	\$150.00
13.	Non-farm animals Examples: Dogs, cats, birds, horses	
	☐ No ☑ Yes. Describe (2) dogs	\$0.00
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	No Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here	→ \$1,400.00

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 11 of 64

Debtor 1 Debtor 2		Michael L Johnson Aileen N Johnson Case number (if known)						
P	art 4:	Describe Your Financial Assets						
		n or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.					
16.	Cash Exampl	ples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you petition	ou file your					
	☐ No ✓ Yes	os	\$0.00					
17.	-	sits of money bles: Checking, savings, or other financial accounts; certificates of deposit; shares in credit u brokerage houses, and other similar institutions. If you have multiple accounts with the institution, list each.						
	☐ No ✓ Yes	esInstitution name:						
	17	7.1. Checking account: Checking account (Bank of America)	\$40.00					
18.	Exampl	s, mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with brokerage firms, money market accounts						
	✓ No ☐ Yes	esInstitution or issuer name:						
19.	-	ublicly traded stock and interests in incorporated and unincorporated businesses, incluerest in an LLC, partnership, and joint venture	uding					
	info	es. Give specific formation about						
20			of ownership:					
20.	Negotia	nment and corporate bonds and other negotiable and non-negotiable instruments iable instruments include personal checks, cashiers' checks, promissory notes, and money or egotiable instruments are those you cannot transfer to someone by signing or delivering them						
	info	o es. Give specific formation about em Issuer name:						
21.		ment or pension accounts bles: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension profit-sharing plans	n or					
		os. List each count separately. Type of account: Institution name:						
22.	Your sh Example	ity deposits and prepayments thare of all unused deposits you have made so that you may continue service or use from a coles: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunies, or others						
	✓ No							
23.	ш	es	er of vears)					
	✓ No		• ***					

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 12 of 64

	tor 1	Michael L Johnson				
Deb	tor 2	Aileen N Johnson		Case number (if k	known)	
24.		ts in an education IRA, C. §§ 530(b)(1), 529A(b)	•	ed ABLE program, or under a qualified s	state tuition pro	ogram.
	☑ No					
	_			n. Separately file the records of any interes		§ 521(c)
25.	powers	equitable or future inte exercisable for your b		nan anything listed in line 1), and rights	or	
	✓ No	s. Give specific				
		ormation about them				
26.			cs, trade secrets, and others, websites, proceeds from	er intellectual property; n royalties and licensing agreements		
	☑ No					
		s. Give specific ormation about them				
27.		es, franchises, and other	•	e association holdings, liquor licenses, pro	ofessional licen	ses
	☑ No					
		s. Give specific ormation about them				
Mor	ney or pı	operty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you				
	✓ No	s. Give specific informati	on		Federal	:
	abo	out them, including wheth			State:	
	•	already filed the returns I the tax years				
	arre	tilo tax youro			Local:	
29.	Exampl	support les: Past due or lump sui	m alimony, spousal support	c, child support, maintenance, divorce settl	ement, property	y settlement
	✓ No	s. Give specific informati	on	Δlim	nony:	
	П .с.	s. Give specific informati	OII		,	
					ntenance:	
					port:	
					orce settlement:	
				Prop	perty settlement	t:
30.			oility insurance payments, d	isability benefits, sick pay, vacation pay, w loans you made to someone else	vorkers'	
	✓ No ☐ Yes	s. Give specific informati	on			
31.		ts in insurance policies les: Health, disability, or		gs account (HSA); credit, homeowner's, or	renter's insura	nce
	☑ No					
		s. Name the insurance npany of each policy				
		l list its value	Company name:	Beneficiary:	Su	rrender or refund value:

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 13 of 64

	tor 1 tor 2	Michael L Johnson Aileen N Johnson Case number (if know	<i>m</i>)
32.	If you a	erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently to receive property because someone has died	
	✓ No ☐ Yes	. Give specific information	
33.		against third parties, whether or not you have filed a lawsuit or made a demand for paymen es: Accidents, employment disputes, insurance claims, or rights to sue	t
	✓ No ☐ Yes	. Describe each claim	
34.		ontingent and unliquidated claims of every nature, including counterclaims of the debtor an o set off claims	d
	✓ No ☐ Yes	. Describe each claim	
35.	Any fin	ancial assets you did not already list	
	✓ No ☐ Yes	. Give specific information	
36.		dollar value of all of your entries from Part 4, including any entries for pages you have d for Part 4. Write that number here	→ \$40.00
Pa	art 5:	Describe Any Business-Related Property You Own or Have an Interest In.	List any real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any business-related property?	
	✓ No.	Go to Part 6.	
	☐ Yes	. Go to line 38.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	ts receivable or commissions you already earned	
	✓ No ☐ Yes	. Describe	
39.		equipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephodesks, chairs, electronic devices	ones,
	✓ No ☐ Yes	. Describe	
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of your trade	
	✓ No ☐ Yes	. Describe	
41.	Invento	ry	
	✓ No ☐ Yes	. Describe	
42.	Interest	s in partnerships or joint ventures	
	☑ No □ Yes	. Describe Name of entity: % of ow	nership:

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 14 of 64

	tor 2 Michael L Johnson Aileen N Johnson Case number (if known)	
43.	Customer lists, mailing lists, or other compilations	
	 No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe 	
44.	Any business-related property you did not already list	
	✓ No✓ Yes. Give specific information.	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.00
Pa	art 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a If you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7. ✓ Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry, farm-raised fish ✓ No ☐ Yes	
48.	Cropseither growing or harvested	
	✓ No Yes. Give specific information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No ☐ Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	✓ No Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	✓ No Yes. Give specific information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pa	art 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	
	✓ No ☐ Yes. Give specific information.	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 15 of 64

Debte Debte		Michael L Johnson Aileen N Johnson	Case number (if known)					
54.	Add the	ne dollar value of all of your entries from Part 7. Write the	hat number here	······································	,	\$0.00		
Pa	art 8:	List the Totals of Each Part of this Form						
55.	Part 1:	: Total real estate, line 2		→		\$0.00		
56.	Part 2:	: Total vehicles, line 5	\$14,000.00					
57.	Part 3:	: Total personal and household items, line 15	\$1,400.00					
58.	Part 4:	: Total financial assets, line 36	\$40.00					
59.	Part 5:	: Total business-related property, line 45	\$0.00					
60.	Part 6:	: Total farm- and fishing-related property, line 52	\$0.00					
61.	Part 7:	: Total other property not listed, line 54	+\$0.00					
62.	Total p	personal property. Add lines 56 through 61	\$15,440.00	Copy personal property total	+	\$15,440.00		
63	Total c	of all property on Schedule A/B. Add line 55 + line 62				\$15.440.00		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Page 16 of 64 Document

Fill in this inf	ormation to i	dentify your case	:
Debtor 1	Michael First Name	L Middle Name	Johnson Last Name
Debtor 2	Aileen	N	Johnson
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS
Case number (if known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Cla	ım as Exempt			
 Which set of exemptions are you claiming? You are claiming state and federal nonban You are claiming federal exemptions. 11 L For any property you list on Schedule A/B th 	kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	,,,	,
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B		ck only one box for h exemption	
Brief description: 2013 Chevy Maliu (approx. 58000 miles) Line from Schedule A/B:3.1	\$14,000.00		\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Brief description: (3) rooms of bedroom furniture, kitchen & living room furniture, misc. household goods Line from Schedule A/B:6	\$750.00		\$750.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

3.	Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)					
	 No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes 					

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 17 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson Case number (if known) Part 2: **Additional Page Current value of** Amount of the Specific laws that allow exemption Brief description of the property and line on Schedule A/B that lists this property exemption you claim the portion you own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$400.00 \$400.00 735 ILCS 5/12-1001(b) $\overline{\mathbf{V}}$ (4) televisions, (2) cell phones, x-box & 100% of fair market games value, up to any applicable statutory Line from Schedule A/B: 7 limit Brief description: \$100.00 \$100.00 735 ILCS 5/12-1001(a), (e) $\overline{\mathbf{Q}}$ clothing 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$150.00 735 ILCS 5/12-1001(b) \$150.00 $\overline{\mathbf{Q}}$ Wedding ring 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$0.00 \$0.00 735 ILCS 5/12-1001(b) ablaCash 100% of fair market value, up to any Line from Schedule A/B: 16 applicable statutory limit Brief description: \$40.00 735 ILCS 5/12-1001(b) \$40.00 $\overline{\mathbf{Q}}$ **Checking account (Bank of America)** 100% of fair market value, up to any Line from Schedule A/B: 17.1 applicable statutory limit

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 18 of 64

Fill in this inf	ormation to iden	tify your case:					
Debtor 1	Michael	L	Johnson				
Debtor 1	First Name	Middle Name	Last Name				
Debtor 2	Aileen	N	Johnson				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for the	: NORTHERN DIS	STRICT OF ILLINOIS	<u> </u>			
Case number (if known)					☐ Check if this is	s an	
(II KIIOWII)					amended filing	9	
Official Form	106D						
Schedule D:	Creditors Wh	no Have Clair	ns Secured by	Property		12/15	
correct information On the top of any 1. Do any credit No. Che Yes. Fill	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below.						
claim, list the creditor has a	ed claims. If a credit creditor separately for particular claim, list the ible, list the claims in e.	r each claim. If more	e than one Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1		Describe the p		\$19,402.00	\$19,402.00		
Baxter Credit Ur	nion	secures the cl					
Creditor's name 340 N. Milwauke Number Street	ee Ave.	— 2013 Chevy I —	wanbu				
		As of the date	you file, the claim is:	Check all that apply.			
		Contingent	•				
Vernon Hills City	IL 60061 State ZIP Code	Unliquidate	ed				
		☐ Disputed					
Who owes the dek	ot? Check one.		Check all that apply.				
Debtor 2 only			ent you made (such as		car loan)		
Debtor 1 and D	ebtor 2 only	_	en (such as tax lien, mo	echanic's lien)			
	the debtors and anoth	nor -	ien from a lawsuit uding a right to offset)				
Check if this of to a communit			3 <u>3</u> 3331)				
Date debt was inc		Last 4 digits of	f account number				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$19,402.00

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 19 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson		Case number (if known)				
	Additional Page After listing any entries on this page, number them sequentially from the previous page.		Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
Luthersales Creditor's name 129 Oser Avenue, Suite#A Number Street	Describe the property that secures the claim: Freezer	\$1,394.00	\$250.00	\$1,144.00		
Hauppauge NY 11788 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,394.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$20,796.00

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 20 of 64

Fill in this inf	ormation to ide	ntify your ca	ase:			
Debtor 1	Michael	L	Johnson			
	First Name	Middle Name	Last Name			
Debtor 2	Aileen	N	Johnson			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for th	ne: NORTHER	N DISTRICT OF ILLINOIS			
Case number (if known)					Check if this is a amended filing	an
Official Form	106E/F					
Schedule E/	F: Creditors	Who Have	Unsecured Claims			12/15
on Schedule A/B: Do not include any If more space is no to this page. On the	Property (Official I y creditors with pa eeded, copy the Pa	Form 106A/B) a rtially secured art you need, fi ional pages, w	acts or unexpired leases that coul and on Schedule G: Executory Colclaims that are listed in Schedule II it out, number the entries in the rite your name and case number (secured Claims	ntracts and Unexpire D: Creditors Who Hoboxes on the left. At	d Leases (Officia old Claims Secur	l Form 106G). ed by Property.
	ors have priority u	nsecured clain	ns against you?			
□ No. Go t		niscoured ciam	ns against you:			
✓ Yes.	o r an z.					
claim. For eac show both pric more space is	ch claim listed, iden ority and nonpriority	tify what type of amounts. As m unsecured clain	creditor has more than one priority u claim it is. If a claim has both priori such as possible, list the claims in al ns, fill out the Continuation Page of I	ity and nonpriority amo	ounts, list that clair	m here and or's name. If
(For an explan	nation of each type of	of claim, see the	e instructions for this form in the instr	ruction booklet.		
				Total claim	Priority amount	Nonpriority amount
2.1				\$1,124.00	\$1,124.00	\$0.00
Illinois Departme			Last 4 digits of account number			
P.O. Box 64338	е		When was the debt incurred?			
Number Street					_	
			As of the date you file, the claim Contingent	is: Check all that app	ly.	
Chicago			Unliquidated			
Chicago City		0664-0338 P Code	Disputed			
Who incurred the	debt? Check one) .	Type of PRIORITY unsecured cla	im:		
Debtor 1 only Debtor 2 only			Domestic support obligations	vov ove the governmen	ant.	
Debtor 1 and D	•		Taxes and certain other debts: Claims for death or personal in		ent	
At least one of	the debtors and and		intoxicated			
	claim is for a comm	unity debt	Other. Specify			
Is the claim subject No	or to onser?					
Yes						

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 21 of 64

Debtor 1 Michael L John Debtor 2 Aileen N John			Case number (if knowr	n)	
Part 1: Your PRIOR	RITY Unsecured C	Claims Continuation Page			
After listing any entries on the previous page.	nis page, number the	em sequentially from the	Total claim	Priority amount	Nonpriority amount
2.2			\$3,000.00	\$3,000.00	\$0.00
Priority Creditor's Name		 Last 4 digits of account number 			
P.O. Box 7346 Number Street		When was the debt incurred?		_	
Nulliber Street		As of the date you file, the claim Contingent	is: Check all that app	bly.	
Philadelphia P		Unliquidated Disputed			
•	ate ZIP Code heck one.	Type of PRIORITY unsecured cla	aim·		
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 onl □ At least one of the debtors □ Check if this claim is for Is the claim subject to offset □ No □ Yes	and another a community debt	 □ Domestic support obligations ☑ Taxes and certain other debts □ Claims for death or personal ir intoxicated □ Other. Specify 	you owe the governm	ent	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 22 of 64

Debtor 1 Debtor 2	Michael L Johnson Aileen N Johnson	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
If a cree type of	es I of your nonpriority unsecured claims editor has more than one nonpriority unsectaim it is. Do not list claims already inc	claims against you? . Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
4.1		\$524.00
	Health Care	Last 4 digits of account number
P.O. Box 4	reditor's Name 48458	When was the debt incurred?
	Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Oak Park	MI 48237	Disputed
Debtor Debtor Debtor At least Check		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify
✓ No	. Subject to enset.	
Yes		
4.2		A
	Haalib Oana Haanifala	\$1,127.00
	Health Care Hospitals reditor's Name	Last 4 digits of account number
P.O. Box 3		When was the debt incurred? - As of the date you file, the claim is: Check all that apply.
		☐ Contingent☐ Unliquidated☐ Disputed
Debtor Debtor Debtor At least Check	State ZIP Code red the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 23 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$125.00
Americash Loans	Last 4 digits of account number	
Nonpriority Creditor's Name 880 Lee Street, Suite 302	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Des Plaines IL 60016		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a consention agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.4		\$1,647.00
Archerfield Funding	Last 4 digits of account number	
Nonpriority Creditor's Name 3601 PGA Blvd.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Palm Beach Gardens FL 33410		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset? No		
☑ No □ Yes		
4.5		\$368.00
Armed Forces Bank	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 26458	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Kansas City, MO	_ ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
<u></u>	Other. Specify	
_		
Is the claim subject to offset? ☑ No		
☐ Yes		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 24 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$1,235.00
AT&T	Last 4 digits of account number	· · · · · · · · · · · · · · · · · · ·
Nonpriority Creditor's Name P.O. Box 8212	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Aurora IL 60572-8212 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	V Strony	
Is the claim subject to offset?		
No Yes		
Yes		
4.7		\$690.00
Athletic & Therapeutic Institute	Last 4 digits of account number	· ·
Nonpriority Creditor's Name 4947 Paysphere Circle	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Chicago IL 60674-4947		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
No		
Yes		
4.8		\$250.00
Baxter Credit Union	Last 4 digits of account number	\$250.00
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 8133 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Vernon Hills IL 60061-8133	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations grising out of a constation agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset? ✓ No		
☐ Yes		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 25 of 64

Debtor 1	Michael L Johnson		
Debtor 2	Aileen N Johnson	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	m sequentially from the	Total claim
4.9			\$559.00
Capital O	ne	Last 4 digits of account number	
Nonpriority C P.O. Box	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ Disputed	
Salt Lake	City UT 84130-0281 State ZIP Code		
City Who incur	red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	· 2 only · 1 and Debtor 2 only	that you did not report as priority claims	
<u> </u>	st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
_	if this claim is for a community debt		
Is the clair	m subject to offset?		
✓ No			
Yes			
4.10			\$546.00
Certified	Services	Last 4 digits of account number	<u> </u>
Nonpriority C P.O. Box	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ ☐ Disputed	
Waukega City	In IL 60079-0177 State ZIP Code	— Toward MONDRIADITY was a sound delain.	
•	red the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor	•	☐ Obligations arising out of a separation agreement or divorce	
≒ ~	· 2 only · 1 and Debtor 2 only	that you did not report as priority claims	
<u> </u>	st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check	if this claim is for a community debt		
	m subject to offset?		
☑ No			
☐ Yes	a for Associates for Femily Dentist	n.,	
Collecting	g for Associates for Family Dentist	ту	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 26 of 64

Debtor 1	Michael L Johnson		
Debtor 2	Aileen N Johnson	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	em sequentially from the	Total claim
4.11			\$250.00
Chhabia	Neurological Services	Last 4 digits of account number	φ230.00
	Creditor's Name	When was the debt incurred?	
	Street	As of the date you file, the claim is: Check all that apply.	
Number	Street	Contingent	
		Unliquidated	
0		Disputed	
Gurnee City	IL 60031 State ZIP Code	Type of NONDRIORITY unacquired claims	
-	red the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
☐ Debtor	1 only	☐ Obligations arising out of a separation agreement or divorce	
_	2 only	that you did not report as priority claims	
	1 and Debtor 2 only st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	if this claim is for a community debt	Other. Specify	
ш	•		
No No	n subject to offset?		
Yes ☐			
4.12			\$850.00
	wealth Edison	Last 4 digits of account number	
Nonpriority C 2100 Swi	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		Unliquidated	
Oakbrool	k IL 60523-1559	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	☐ Student loans	
☐ Debtor	2 only	Obligations arising out of a separation agreement or divorce	
_	1 and Debtor 2 only	that you did not report as priority claims	
	st one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check	if this claim is for a community debt	✓ Other. Specify	
_	m subject to offset?		
√ No	•		
Yes			

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 27 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson	Case number (if known)	
Part 2: Your NONPRIORITY	Unsecured Claims Continuation Page	
After listing any entries on this page, n previous page.	umber them sequentially from the	Total claim
4.13		\$225.00
Credit Control	Last 4 digits of account number	
Nonpriority Creditor's Name 5757 Phantom Dr., Ste. 330	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated Disputed	
Hazelwood MO 630	42	
City State ZIP C Who incurred the debt? Check one.	Type of North Cloth Full secured Claim.	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and anoth	Other. Specify	
Check if this claim is for a commun	nity debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
collecting for Vista		
4.14		\$809.00
Credit First N.A./Bridgestone/Fires Nonpriority Creditor's Name	tone Last 4 digits of account number	
P.O. Box 81410	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
- <u>-</u>	Disputed	
Cleveland OH 441 City State ZIP C		
Who incurred the debt? Check one.	Type of NONF KIOKITT unsecured claim.	
Debtor 1 only	Student loansObligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and anoth	Other. Specify	
Check if this claim is for a commun	iity uebt	
Is the claim subject to offset? ✓ No		
Yes		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 28 of 64

After listing any entries on this page, number them sequentially from the previous page. 4.15 First Premier Bank Nonpriority Creditor's Name 3820 N. Louise Ave. Number Street Slate ZIP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Aleast one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Nonpriority Creditor's Name 300 International Dr. PMB#10015 Number Street Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify \$192.00 State ZIP Code When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed \$192.00 \$192.00 Type of NONPRIORITY unsecured claim: Unliquidated Disputed Type of NONPRIORITY unsecured claim:	Debtor 1 Debtor 2	Michael L Johnson Aileen N Johnson	Case number (if known)	
After listing any entries on this page, number them sequentially from the previous page. 4.15 First Premier Bank Nonprority Creditor's Name 320 N. Louise Ave. Number Street Sioux Falls SD 57107-0145 City Slate ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Heast one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonprority Creditor's Name 300 International Dr. PMB#10015 Number Street When was the debt incurred? As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Men was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed \$192.00 \$192.00 Type of NONPRIORITY unsecured claim: Unliquidated Disputed Type of NONPRIORITY unsecured claim: Unliquidated Disputed Type of NONPRIORITY unsecured claim: Unliquidated Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Total claim \$887.00	Port 2	Your NONDRIORITY Uncome		
A				
First Premier Bank Nonpriority Creditor's Name 3820 N. Louise Ave. Number Street Sioux Falls SD 57107-0145			m sequentially from the	Total claim
First Premier Bank Nonpriority Creditor's Name 3820 N. Louise Ave. Number Street Sioux Falls SD 57107-0145 Unliquidated Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Other. Specify 4.16 Global Credit & Collection Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Disputed	4.15			\$887.00
Sioux Falls SD 57107-0145 City State ZIP Code Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	First Pren	nier Bank	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply. Contingent Contingent Contingent			When was the debt incurred?	
Sioux Falls Sioux			As of the date you file, the claim is: Check all that apply.	
Disputed			— —	
Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.16 Global Credit & Collection Nonpriority Creditor's Name 300 International Dr. PMB#10015 Number Street Buffalo NY 14221 City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify \$192.00 \$192.00 \$192.00 Type of NONPRIORITY unsecured claim: Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans				
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ 4.16 □ Global Credit & Collection Nonpriority Creditor's Name 300 International Dr. PMB#10015 Number Street □ Ny 14221 □ City State ZIP Code Who incurred the debt? Check one. □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Other. Specify □ Other. Specify □ Student loans			Type of NONPRIORITY unsecured claim:	
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Street □ Check if this claim is for a community debt Last 4 digits of account number □ When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Student loans □ Student loans	Who incurr		•	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.16 Global Credit & Collection Nonpriority Creditor's Name 300 International Dr. PMB#10015 Number Street Buffalo NY 14221 City State ZIP Code Who incurred the debt? Check one. That you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Cother. Specify Debts to pension or profit-sharing plans, and other similar debts When. Specify State ZIP Code Type of NONPRIORITY unsecured claim: Student loans	≝ ~	•		
Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes 4.16 Global Credit & Collection Nonpriority Creditor's Name 300 International Dr. PMB#10015 Number Street Buffalo NY 14221 City State ZIP Code Who incurred the debt? Check one. Debter 1 only Other. Specify Other. Specify	느	•		
Is the claim subject to offset? No Yes 4.16 Global Credit & Collection Nonpriority Creditor's Name 300 International Dr. PMB#10015 Number Street Buffalo Ny 14221 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only \$192.00 \$192.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	= *			
No Yes	ш	•	_	
Yes		n subject to offset?		
Global Credit & Collection Nonpriority Creditor's Name 300 International Dr. PMB#10015 Number Street	\mathbf{v}			
Global Credit & Collection Nonpriority Creditor's Name 300 International Dr. PMB#10015 Number Street	4.16			•4
Nonpriority Creditor's Name 300 International Dr. PMB#10015 Number Street Buffalo City State ZIP Code When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans		edit & Collection	Last 4 digits of account number	\$192.00
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	Nonpriority Cr	reditor's Name		
Buffalo NY 14221 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Student loans				
Buffalo NY 14221 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Student loans			_ Contingent	
Buffalo NY 1421 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Student loans				
Who incurred the debt? Check one. Student loans				
Debtor 1 only	- 7		•	
T I Obligations ansing out of a separation agreement of givorce			Obligations arising out of a separation agreement or divorce	
Debtor 2 only that you did not report as priority claims	브			
Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Other Specify				
☐ Check if this claim is for a community debt	☐ Check	if this claim is for a community debt	V Other. Specify	
Is the claim subject to offset?	Is the claim	n subject to offset?		
☑ No Ves	ب ب			
□ Yes Collecting for QVC		ı for QVC		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 29 of 64

Debtor 1	Michael L Johnson		
Debtor 2	Aileen N Johnson	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listir	ng any entries on this page, number the page.	em sequentially from the	Total claim
4.17			\$6,777.00
Greentre	e & Associates	Last 4 digits of account number	
Nonpriority C P.O. Box	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		Unliquidated Disputed	
Escondic			
City Who incur	State ZIP Code rred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	r 1 only	Student loans Obligations origing out of a constration agreement as diverse.	
Debtor	r 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	r 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	st one of the debtors and another	☑ Other. Specify	
_	if this claim is for a community debt		
	m subject to offset?		
✓ No ☐ Yes			
	g for Elco Lombard		
	g for Lioo Lombara		
4.18			\$3,873.00
	n Surgery Center	Last 4 digits of account number	
	Creditor's Name lister Dr., #100	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		Unliquidated Disputed	
Libertyvi		— — — — — — — — — — — — — — — — — — —	
City Who incur	State ZIP Code rred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	r 1 only	Student loans Obligations origing out of a constration agreement as diverse.	
Debtor	r 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Ľ	r 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	st one of the debtors and another	☑ Other. Specify	
_	t if this claim is for a community debt		
	m subject to offset?		
✓ No ☐ Yes			
⊔ '''			

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 30 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.19		\$71.00
Illinois Bone & Joint Institute	Last 4 digits of account number	· · · · · · · · · · · · · · · · · · ·
Nonpriority Creditor's Name 5057 Paysphere Cir.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Chicago IL 60674		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
-		
Is the claim subject to offset? ✓ No		
Yes		
4.20		\$1,576.00
Illinois Tollway Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 5544	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Chicago IL 60680-5544 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
4.21		\$67.00
LJ Jared Jewelers	Last 4 digits of account number	Ψ07.00
Nonpriority Creditor's Name	When was the debt incurred?	
375 Ghent Rd. Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Akron OH 44333-4601	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No □ Yes		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 31 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.22		\$1,731.00
Kahuna Payment Solutions	Last 4 digits of account number	
Nonpriority Creditor's Name 807 Arcadia Dr., Ste#C	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Bloomington IL 61704 City State ZIP Code	— Taras of NONDRIORITY and a constability	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?		
<u>M</u> No		
Yes		
4.23		\$426.00
Kohl's	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 3084 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Milwaukee WI 53201-3084		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
4.24		\$373.00
Lake County Head & Neck Specialists	Last 4 digits of account number	Ψ373.00
Nonpriority Creditor's Name	When was the debt incurred?	
222 S. Greenleaf, #106 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Gurnee IL 60031	─ □ Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?		
✓ No		
□ Yes		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 32 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.25		\$91.00
Lake County Acute Care, LLP	Last 4 digits of account number	
Nonpriority Creditor's Name 4350 Fowler St, Ste#15	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Fort Myers FL 33901-2616		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?		
✓ No		
Yes		
4.26		C74 00
	Last 4 digits of account number	\$671.00
Linebarger, Goggan, Blair & Sampson LLP Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 06357 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Chicago IL 60606-0357	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No □ Yes		
4.27		\$5,209.00
Northwestern Lake Forest Hospital	Last 4 digits of account number	
Nonpriority Creditor's Name 660 N. Westmoreland Rd.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	— ☐ Disputed	
Lake Forest IL 60045 City State ZIP Code	— Turns of MONIPPIOPITY unaccounted alaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
✓ Debtor 1 and Debtor 2 only✓ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No		
☐ Yes		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 33 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson Case number (if known)		
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.28		\$161.00
Northwestern Medicine	Last 4 digits of account number	
Nonpriority Creditor's Name 28155 Network Place	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Chicago IL 60673-1281		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a congration agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset? I√I No		
☑ No □ Yes		
4.29		\$900.00
Peoples Energy	Last 4 digits of account number	
Nonpriority Creditor's Name 130 E. Randolph, 14th Floor	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Special Procedures	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Chicago IL 60601		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.30		\$2,108.00
PLS	Last 4 digits of account number	
Nonpriority Creditor's Name 3003 W. Northwest Hwy	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	☐ Disputed	
Dallas TX 75220		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset? ✓ No		
Yes No		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 34 of 64

Debtor 1 Debtor 2	Michael L Johnson Aileen N Johnson	Case number (if known)	
Dort 2	Vous NONDDIODITY Unaccus		
Part 2:		red Claims Continuation Page	
After listin previous p	ig any entries on this page, number the page.	em sequentially from the	Total claim
4.31			\$13,041.00
Prestige	Financial Services	Last 4 digits of account number	Ψ10,041.00
Nonpriority C	Creditor's Name	When was the debt incurred?	
1420 S. 5 Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ Disputed	
Salt Lake			
City Who incur	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor	1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
ш _	2 only	that you did not report as priority claims	
<u> </u>	1 and Debtor 2 only st one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
<u> </u>	if this claim is for a community debt		
_	m subject to offset?		
✓ No	in subject to onset:		
Yes			
4.32			4007.00
	anal Account Management	Last 4 digits of account number	\$287.00
	onal Account Management Creditor's Name	When was the debt incurred?	
P.O. Box			
Number	Street	As of the date you file, the claim is: Check all that apply. — Contingent	
		Unliquidated	
Milwauke	ee WI 53201	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
=	· 1 only · 2 only	Obligations arising out of a separation agreement or divorce	
_	1 and Debtor 2 only	that you did not report as priority claims	
	st one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check	if this claim is for a community debt	V Caron Speeding	
	m subject to offset?		
☑ No			
Yes			
Collecting	g for IL Tollway		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 35 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson Case number (if known)		
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.33		\$45.00
Specialty Medical Services, Inc.	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred?	
479 Business Center Drive, Apt#108 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Mount Prospect IL 60056-6037		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset? ✓ No		
Yes		
4.34		\$217.00
Speedway/Superamerica	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 1590	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
	— ☐ Disputed	
Springfield OH 45501 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?		
No		
Yes		
405		
4.35		\$1,398.00
Sprint Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 8077	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
London KY 40742 City State ZIP Code	Type of NONERIORITY uncontrad claim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
✓ Debtor 1 and Debtor 2 only✓ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
✓ No		
Yes		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 36 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson Case number (if known)		
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.36		\$340.00
T-Mobile	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 629025	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
EL Dorado HIS CA 95762-9025 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?		
✓ No		
Yes		
4.37		£450.00
	Last 4 digits of account number	\$452.00
Target/Retailers National Bank Nonpriority Creditor's Name	When was the debt incurred?	
3901 West 53rd Street Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Sioux Falls SD 57106-4216	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No □ Yes		
4.38		\$424.00
Total Card, Inc.	Last 4 digits of account number	
Nonpriority Creditor's Name 5109 S. Broadband Lane	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Sioux Falls SD 57108		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
✓ Debtor 1 and Debtor 2 only✓ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
✓ No		
T Yes		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 37 of 64

Debtor 1 Michael L Johnson Debtor 2 Aileen N Johnson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.39		\$1,346.00
Verizon Wireless	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 4002	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Acworth GA 30101 City State ZIP Code	— Taras of NONDRIORITY and a constability	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
4.40		\$788.00
Vista Health System & Patient Financial	Last 4 digits of account number	4.00.00
Nonpriority Creditor's Name 1324 N. Sheridan Rd.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Waukegan IL 60085-2161		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
4.41		\$246.00
U Williams & Williams	Last 4 digits of account number	Ψ240.00
Nonpriority Creditor's Name	When was the debt incurred?	
1612 N.E. Expressway Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Atlanta GA 30329	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?		
✓ No		
□ Yes		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 38 of 64

Debtor 1 Debtor 2	Michael L Jo Aileen N Joh							Case	e number (if known)
Part 3:	List Other	s to B	Notified Abou	ut a Del	bt Th	at \	ou Already	/ Li	sted
For ex credit debts	xample, if a colle tor in Parts 1 or i that you listed i	ection ag 2, then I n Parts	gency is trying to ist the collection a	collect fr agency h litional c	om yo ere. S reditor	u fo imil	or a debt you d larly, if you ha	owe ive n	ebt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for
	rvices, Inc.			_ On w	hich e	ntry	in Part 1 or F	art 2	2 did you list the original creditor?
Name 3451 Hari Number	ry S. Truman B Street	lvd.		Line _	4.9	_of	(Check one):	_	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
				— Last	4 digits	s of	account num	ber	
St. Charle	es	MO State	63301 ZIP Code	_					
Fedloan S	Servicing			On w	hich e	ntry	in Part 1 or F	art 2	2 did you list the original creditor?
P.O. Box Number	60610 Street			Line _		_of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
			47400	— Last	4 digits	s of	account num	ber	
Harrisbur City 9835, def		PA State	ZIP Code	_					
ŕ	Collection Serv	/ice		On w	hich e	ntry	in Part 1 or F	art 2	2 did you list the original creditor?
Name 2978 W. J Number	Jackson St. Street			Line _		_of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
				— — Last	4 digits	s of	account num	Ы ber	
Tupelo City Collecting	g for AT & T	MS State	38803-3910 ZIP Code	_					
Illinois To	ollway			On w	hich e	ntry	in Part 1 or F	art 2	2 did you list the original creditor?
P.O. Box Number	79 Street			Line _		_of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
				_					Part 2: Creditors with Nonpriority Unsecured Claims
Elgin City		IL State	60121 ZIP Code	— Last	4 digits	s of	account num	ber	
	rld Systems			On w	hich e	ntry	in Part 1 or F	art 2	2 did you list the original creditor?
Name 400 Lake Number	side Dr., Ste. 2 Street	00		Line _		_of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Horsham	1	PA	19044	— Last	4 digits	s of	account num	ber	
City		State	ZIP Code	_					

Collecting for Hawthorn Surgery Center

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 39 of 64

Debtor 1 Debtor 2	Michael L Jo Aileen N Joh			Case number (if known)
Part 3:	List Other	s to Be	Notified Ab	out a Debt That You Already Listed Continuation Page
	t Medical Cent	ter		On which entry in Part 1 or Part 2 did you list the original creditor?
	merce Way, S Street	Ste. 100		Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Brentwoo City	d	TN State	37027 ZIP Code	— Last 4 digits of account number

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 40 of 64

Debtor 1	Michael L Johnson		
Debtor 2	Aileen N Johnson	Case number (if known)	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$4,124.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. _	÷\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$4,124.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. _	\$52,902.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$52,902.00

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 41 of 64

Fill in this inf	ormation to iden				
Debtor 1	Michael	L	Johnson		
	First Name	Middle Name	Last Name		
Debtor 2	Aileen	N	Johnson		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the	: NORTHERN DIST	RICT OF ILLINOIS		
Case number		1 Chook if this is an			
(if known)				_	Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 42 of 64

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No					_
Debtor 2 Aileen N Johnson	Fill in this inf	ormation to i	dentify your case	:	
Debtor 2 Aileen N Johnson (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If wow married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes Did your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106G), Schedule E/F (Official Form 106G). Use	Debtor 1	Michael	L	Johnson	1
(Spouse, if filing) First Name		First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number ((if known)) Check if this is an amended filling Check if this is an amended filing Check if the Additional Pages, il if the bottom of the manuer in the amended					
Case number (if known) Check if this is an amended filing Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this bage. On the top of any Additional Pages, write your name and case number (if known). Answer every question. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106G). Use	(Spouse, if filing)	First Name	Middle Name	Last Name	
Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this bage. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	
Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	Case number				
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Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No	Official Form	1064			
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No					
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include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	. Do you have	•		`	,
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on <i>Schedule D</i> (Official Form 106D), <i>Schedule E/F</i> (Official Form 106E/F), or <i>Schedule G</i> (Official Form 106G). Use			•	• • • •	
No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	<u> </u>				
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	person show creditor on S	n in line 2 again Schedule D (Offic	as a codebtor only if cial Form 106D), Sche	that person is a guarantor or dule E/F (Official Form 106E/	cosigner. Make sure you have listed the

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 43 of 64

Fill in this inform	mation to identif	y your case:			
Debtor 1	Michael	L	Johnson		
	First Name	Middle Name	Last Name	Che	eck if this is:
Debtor 2	Aileen	N	Johnson	_	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name	— ⊔	7th amenaea ming
United States Bank	cruptcy Court for the:	NORTHERN DI	STRICT OF ILLINOIS	□	A supplement showing postpetition chapter 13 income as of the following date:
Case number					3
(if known)					MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	Employment

1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-fill	ing spou	se
	If you have more than one job, attach a separate page with information about additional employers.	Employment status Occupation	Employed Not emplo	yed		✓ Employed☐ Not employed		
	Include part-time, seasonal, or self-employed work.	Employer's name	CNU Online I	Holdings		VA Medical Cent	er	
	Occupation may include student or homemaker, if it applies.	Employer's address	Number Street			3001 Green Bay Number Street	Road	
			City	State	Zip Code	North Chicago	IL State	60064 Zip Code
		How long employed the	here?		_			_

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

5. For Debtor 1 for Debtor 2 or non-filling spouse

2. \$4,166.50 \$4,461.17

	btor 2 Aileen N Johnson		Case nu	mhe	r (if known)		
			For Debtor 1	F	For Debtor 2 or non-filing spouse		
	Copy line 4 here	4 .	\$4,166.50		\$4,461.17	_	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$660.83		\$559.00		
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$36.47		
	5c. Voluntary contributions for retirement plans	5c.	\$208.00		\$0.00		
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00		
	5e. Insurance	5e.	<u>\$281.67</u>		\$556.83		
	5f. Domestic support obligations	5f.	\$0.00		\$0.00		
	5g. Union dues	5g.	\$0.00		\$45.50		
	5h. Other deductions. Specify:	5h. +	\$0.00		\$0.00		
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$1,150.50		\$1,197.80		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	. 7.	\$3,016.00		\$3,263.37		
8.	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		\$0.00		
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00		\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$0.00		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00		\$0.00		
	8e. Social Security	8e.	\$0.00		\$0.00		
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$0.00		\$0.00		
	8g. Pension or retirement income	8g.	\$0.00		\$0.00		
	8h. Other monthly income. Specify:	8h. +	\$0.00		\$0.00		
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	. 9.	\$0.00		\$0.00		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,016.00	+	\$3,263.37	=	\$6,279.37
11.	State all other regular contributions to the expenses that you list in Include contributions from an unmarried partner, members of your house friends or relatives.			ur ro	ommates, and oth	er	
	Do not include any amounts already included in lines 2-10 or amounts the	nat are no	ot available to pay	ехр	enses listed in Sch	ned	ule J.
	Specify:				11.	+	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 1	1. The re	esult is the combin	ed m	nonthly 12.		\$6,279.37
	income. Write that amount on the Summary of Your Assets and Liabilitie					Ļ	
	if it applies.						Combined nonthly income
13.	Do you expect an increase or decrease within the year after you file	this for	m [·] ?				
	✓ No. None. Yes. Explain:						

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 45 of 64

G	ill in this inforn	nation to iden	tify your case:			QI	.1. 26 (1.2.	•-	
	Debtor 1	Michael	Ī	Johns	son		ck if this An ame	s is: ended filing	
	200.01	First Name	Middle Name	Last Na				lement showing	postpetition
	Debtor 2	Aileen	N	Johns	son	_	chapte	r 13 expenses a	
	(Spouse, if filing)	First Name	Middle Name	Last Na			followir	ng date:	
	United States Bank	ruptcy Court for th	ne: NORTHERN D	ISTRICT O	F ILLINOIS		MM / D	D / YYYY	_
	Case number (if known)								
<u>O</u> 1	fficial Form 10	06J							
S	chedule J: Yo	our Expens	es						12/15
naı	rrect information. I	If more space is	needed, attach anoti	ner sheet to t	ing together, both ar this form. On the top				
	Is this a joint cas		Seriola						
1.	is this a joint cas)C:							
	No □ Ye	Debtor 2 live in a s. Debtor 2 must	separate household		s for Separate Housel	hold of	f Debtor	2.	
2.	Do you have dep	<u> </u>	No		Dependent's relation	onshii	n to	Dependent's	Does dependent
	Do not list Debtor Debtor 2.	1 and	Yes. Fill out this in for each depender		Debtor 1 or Debtor			age	live with you?
					child			20 yrs.	- Mo - Mo Yes
	Do not state the d names.	lependents'			child			21 yrs.	□ No - ☑ Yes
					child			17 yrs	□ No - ☑ Yes
					child			9 yrs	□ No - ☑ Yes
									□ No - □ Yes
3.	Do your expense expenses of peo yourself and you	ple other than	☑ No □ Yes						
E	art 2: Estim	ate Your Ong	oing Monthly Ex	penses					
to		of a date after t	he bankruptcy is file	-	re using this form as supplemental Sche			•	
	•		ash government assi on Schedule I: Your	•				Your expens	ses
4.		•	penses for your resi				4	4.	\$1,285.00
	If not included in		in the ground and grown						
	4a. Real estate t	axes					4	4a	
	4b. Property, hor	meowner's, or ren	ter's insurance				4	4b	
	4c. Home mainte	enance, repair, an	d upkeep expenses				4	4c	\$70.00
	4d. Homeowner's	s association or c	ondominium dues				4	4d	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 46 of 64

Aileen N Johnson	Case number (if known)	
	Your expe	nses
Additional mortgage payments for your residence, such as home equity loan	s 5	
. Utilities:		
6a. Electricity, heat, natural gas	6a	\$345.00
6b. Water, sewer, garbage collection	6b	\$80.00
 Telephone, cell phone, Internet, satellite, and cable services 	6c	\$325.00
6d. Other. Specify:	6d	
. Food and housekeeping supplies	7.	\$775.0
. Childcare and children's education costs	8.	\$175.0
. Clothing, laundry, and dry cleaning	9.	\$175.00
0. Personal care products and services	10.	\$185.0
1. Medical and dental expenses	11.	\$700.0
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$535.0
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$55.0
4. Charitable contributions and religious donations	14.	
Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	
15b. Health insurance	 15b.	
15c. Vehicle insurance	 15c.	\$200.0
15d. Other insurance. Specify:	 15d.	
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 2	20.	
Specify:	16.	
7. Installment or lease payments:		
17a. Car payments for Vehicle 1 use of mother auto	17a	\$375.0
17b. Car payments for Vehicle 2	17b	
17c. Other. Specify:	17c	
17d. Other. Specify:	17d	
 Your payments of alimony, maintenance, and support that you did not repo deducted from your pay on line 5, Schedule I, Your Income (Official Form 10 		
O Other neumante you make to connect athere who do not live with		
Other payments you make to support others who do not live with you. Specify:	19.	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 47 of 64

	otor 1 otor 2	Michael L Johnson Aileen N Johnson	Case number (if known	u)
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	r. Specify:	21.	
22.	Calcu	ulate your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$5,280.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	. 22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$5,280.00
23.	Calcu	ulate your monthly net income.	_	
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$6,279.37
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$5,280.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$999.37
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	u file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you lent to increase or decrease because of a modification to the terms of your mortgate.	. ,	
	_	No. Yes. Explain here: None.		

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 48 of 64

Fill in this inf	Fill in this information to identify your case:						
Debtor 1	Michael	L	Johnson				
	First Name	Middle Name	Last Name				
Debtor 2	Aileen	N	Johnson				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							
Case number							
(if known)							

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$15,440.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$15,440.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$20,796.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$4,124.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$52,902.00
	Your total liabilities	\$77,822.00
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$6,279.37
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,280.00

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 49 of 64

Debtor 1 Debtor 2		Michael L Johnson Aileen N Johnson	Case number (if known)	
P	art 4:	Answer These Questions for Administrative and Statist	ical Records	
6.	Are you	u filing for bankruptcy under Chapters 7, 11, or 13?		
	□ No ✓ Ye	 You have nothing to report on this part of the form. Check this box and ses 	submit this form to the court with yo	our other schedules.
7.	What k	ind of debt do you have?		
		our debts are primarily consumer debts. Consumer debts are those "incumily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stati		a personal,
		our debts are not primarily consumer debts. You have nothing to report of s form to the court with your other schedules.	on this part of the form. Check this	s box and submit
8.		the Statement of Your Current Monthly Income: Copy your total current me Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	nonthly income from	\$8,522.17
9.	Copy th	he following special categories of claims from Part 4, line 6 of Schedul	e E/F:	
			Total claim	
	From P	Part 4 on Schedule E/F, copy the following:		
			\$0.0	0

From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$4,124.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$4,124.00

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Page 50 of 64 Document

Fill in this inf	Fill in this information to identify your case:					
Debtor 1	Michael First Name	L Middle Name	Johnson Last Name			
Debtor 2	Aileen	N	Johnson			
(Spouse, if filing) First Name Middle Name Last Name						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						
Case number (if known) Check if this is ar amended filing						
Official Form	106Dec					
Declaration About an Individual Debter's Schodules						

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below								
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
☑ No								
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
X /s/ Michael L Johnson Michael L Johnson, Debtor 1	X /s/ Aileen N Johnson Aileen N Johnson, Debtor 2							
Date <u>03/25/2017</u> MM / DD / YYYY	Date <u>03/25/2017</u> MM / DD / YYYY							

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 51 of 64

Eil	ll in this inf	ormation to i	dentify your o	rasa.				
	btor 1	Michael	L		Johnson			
		First Name	Middle Name)	Last Name			
	btor 2 bouse, if filing)	Aileen First Name	N Middle Name)	Johnson Last Name			
			or that NODTHE	DN DIST	DICT OF II	LINOIS		
		nkrupicy Court ic	or the: NORTHE	KN DIST	KICT OF IL	LINOIS		
	se number known)						☐ Check i amende	f this is an ed filing
Off	icial Form	107						
Sta	atement o	f Financial	Affairs for	Indivi	duals Fi	ling for Bank	uptcy	04/16
Pa 1. 2.	What is your ✓ Married ✓ Not marrie	current marital				here You Lived E	Before	
		all of the places	you lived in the la	ast 3 years	s. Do not inc	lude where you live n	OW.	
	Debtor 1:			Dates lived th	Debtor 1 nere	Debtor 2:		Dates Debtor 2 lived there
						☐ Same as Deb	tor 1	☐ Same as Debtor 1
	672 Lenc	x		From	2014			From
		Street		- То —	2017	Number Street		To
				_		-		_
	Waukega	ın IL	60085	_				<u></u>
	City	St	ate ZIP Code			City	State ZIP Code	
3.	City Within the las (Community p Washington, a	St 8 years, did yo property states are and Wisconsin.)	ate ZIP Code	de Arizon	a, California,	uivalent in a commu Idaho, Louisiana, Ne	State ZIP Code nity property state or te vada, New Mexico, Puert	•

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 52 of 64

	nebtor 1 Michael L Johnson Nebtor 2 Aileen N Johnson Case nu					mber (if known)	
Р	art 2:	Explain the	e Sources of Y	our Income			
4.	Fill in th	e total amount o	of income you recei	nent or from operating a bu ved from all jobs and all bus ncome that you receive toge	inesses, including par		endar years?
	□ No ✓ Yes	s. Fill in the deta	ails.				
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ry 1 of the curr ı filed for bankr	•	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$4,067.00	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$3,127.00
		calendar year: December 31,	<u>2016</u>)	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$42,000.00	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$46,000.00
		ndar year befor		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$40,000.00	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$38,000.00
5.	Include unemple	income regardle oyment; and oth nbling and lotter	ess of whether that er public benefit pa	yments; pensions; rental inc	es of other income are come; interest; dividen	alimony; child support; Socia ds; money collected from law eceived together, list it only o	vsuits; royalties;
	☑ No	th source and the		m each source separately. [Do not include income	that you listed in line 4.	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 53 of 64

		Michael L Johnson Aileen N Johnson Case number (if known)				
Part 3:		List Certain Payments You Made Before You Filed for Bankruptcy				
6.	Are eith	ner Debtor 1's or Debtor 2's debts primarily consumer debts?				
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?				
		□ No. Go to line 7.				
		Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.				
		* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.				
	√ Yes	Debtor 1 or Debtor 2 or both have primarily consumer debts.				
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?				
		✓ No. Go to line 7.				
		Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.				
7.	7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.					
	☑ No ☐ Yes	. List all payments to an insider.				
8.		I year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that ed an insider?				
	Include	payments on debts guaranteed or cosigned by an insider.				
	✓ No Yes. List all payments that benefited an insider.					

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 54 of 64

	otor 1 otor 2	Michael L Johnson Aileen N Johnson	Case number (if known)
Р	art 4:	Identify Legal Actions, Repossessions, and Foreclosur	es
9.	List all	1 year before you filed for bankruptcy, were you a party in any lawsui such matters, including personal injury cases, small claims actions, divorcations, and contract disputes.	·
	✓ No	s. Fill in the details.	
10.	seized,	1 year before you filed for bankruptcy, was any of your property report or levied? Ill that apply and fill in the details below.	ssessed, foreclosed, garnished, attached,
		Go to line 11. s. Fill in the information below.	
11.		90 days before you filed for bankruptcy, did any creditor, including a less from your accounts or refuse to make a payment because you owe	
	✓ No ☐ Yes	s. Fill in the details.	
12.		1 year before you filed for bankruptcy, was any of your property in the rs, a court-appointed receiver, a custodian, or another official?	e possession of an assignee for the benefit of
	✓ No ☐ Yes		
Р	art 5:	List Certain Gifts and Contributions	
13.	Within	2 years before you filed for bankruptcy, did you give any gifts with a t	otal value of more than \$600 per person?
	✓ No ☐ Yes	s. Fill in the details for each gift.	
14.		2 years before you filed for bankruptcy, did you give any gifts or cont charity?	ibutions with a total value of more than \$600
	✓ No ☐ Yes	s. Fill in the details for each gift or contribution.	
P	art 6:	List Certain Losses	
15.		1 year before you filed for bankruptcy or since you filed for bankruptcisaster, or gambling?	y, did you lose anything because of theft, fire,
	✓ No ☐ Yes	s. Fill in the details.	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 55 of 64

Debtor 1 Debtor 2	Michael L Johnson Aileen N Johnson	Case numbe	r (if known)	
Part 7	List Certain Payments or	Transfers		
any	one you consulted about seeking ba	uptcy, did you or anyone else acting on your behalf nkruptcy or preparing a bankruptcy petition?		
	No Yes. Fill in the details.	preparers, or credit counseling agencies for services re	equired for your bankrupt	cy.
— Cricket	Debt Counseling	Description and value of any property transferre	d Date payment or transfer was made	Amount of payment
Person Wi	ho Was Paid Street	_	03/26/2017	\$25.00
		_		
City	State ZIP Code	_		
Email or w	ebsite address	_		
Person W	ho Made the Payment, if Not You	_		
	•	ptcy, did you or anyone else acting on your behalf with your creditors or to make payments to your cr		perty to
-	not include any payment or transfer tha	, , , , , ,		
لخا	No Yes. Fill in the details.			
	•	ruptcy, did you sell, trade, or otherwise transfer any rse of your business or financial affairs?	property to anyone, of	ther than
	ude both outright transfers and transfer not include gifts and transfers that you	s made as security (such as granting of a security inte have already listed on this statement.	rest or mortgage on your	property).
-	No Yes. Fill in the details.			
	hin 10 years before you filed for bank are a beneficiary? (These are ofter	rruptcy, did you transfer any property to a self-settlen called asset-protection devices.)	led trust or similar devi	ce of which
	No Yes. Fill in the details.			

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 56 of 64

	otor 1 otor 2	Michael L Johnson Aileen N Johnson	Case number (if known)
P	art 8:	List Certain Financial Accounts, Instruments, Safe Dep	oosit Boxes, and Storage Units
20.		year before you filed for bankruptcy, were any financial accounts or closed, sold, moved, or transferred?	instruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates pension funds, cooperatives, associations, and other financial institutions	·
	✓ No ☐ Yes	. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankrupturities, cash, or other valuables?	tcy, any safe deposit box or other depository
	✓ No ☐ Yes	. Fill in the details.	
22.	-	ou stored property in a storage unit or place other than your home with	thin 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	. Fill in the details.	
P	art 9:	Identify Property You Hold or Control for Someone Els	e
23.	-	hold or control any property that someone else owns? Include any pin trust for someone.	property you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
P	art 10:	Give Details About Environmental Information	
For	the purp	ose of Part 10, the following definitions apply:	
ı	hazardou	nental law means any federal, state, or local statute or regulation con s or toxic substance, wastes, or material into the air, land, soil, surfa statutes or regulations controlling the cleanup of these substances,	ce water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	ntal law, whether you now own, operate, or
		us material means anything an environmental law defines as a hazarde, hazardous material, pollutant, contaminant, or similar item.	dous waste, hazardous substance, toxic
Rep	ort all no	otices, releases, and proceedings that you know about, regardless of	when they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially	liable under or in violation of an environmental
	✓ No ☐ Yes	. Fill in the details.	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 57 of 64

	otor 1 otor 2	Michael L Johnson Aileen N Johnson	Case number (if known)
25.	✓ No	ou notified any governmental unit of any release of hazardous materia . Fill in the details.	11?
26.	Have you	ou been a party in any judicial or administrative proceeding under any	environmental law? Include settlements and
	✓ No ☐ Yes	. Fill in the details.	
P	art 11:	Give Details About Your Business or Connections to A	ny Business
27.	. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?		
		A sole proprietor or self-employed in a trade, profession, or other activity A member of a limited liability company (LLC) or limited liability partnersh A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation	nip (LLP)
	17.1	None of the above applies. Go to Part 12. Check all that apply above and fill in the details below for each business.	5.
28.		2 years before you filed for bankruptcy, did you give a financial staten ncial institutions, creditors, or other parties.	nent to anyone about your business? Include
	□ No □ Yes	. Fill in the details below.	

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 58 of 64

Debtor 1 Debtor 2	Michael L Johnson Aileen N Johnson	Case number (if known)
Part 12	Sign Below	· · · · · · · · · · · · · · · · · · ·
that answe	ers are true and correct. I unders	Financial Affairs and any attachments, and I declare under penalty of perjury od that making a false statement, concealing property, or obtaining money or ptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, 1.
X /s/ Mic	hael L Johnson	X /s/ Aileen N Johnson
Michael	L Johnson, Debtor 1	Aileen N Johnson, Debtor 2
Date _	03/25/2017	Date03/25/2017
Did you at	tach additional pages to Your Sta	nent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes		
Did you pa	ay or agree to pay someone who	ot an attorney to help you fill out bankruptcy forms?
√ No		
	lame of person	Attach the Bankruptcy Petition Preparer's Notice,
		Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$75	filing fee administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee

\$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 63 of 64

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

In re Michael L Johnson
Aileen N Johnson

Chapter 13

	Chapter 10	
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named do that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankri is as follows:		
	For legal services, I have agreed to accept	
	Prior to the filing of this statement I have received	
	Balance Due	
2.	The source of the compensation paid to me was:	
	☑ Debtor ☐ Other (specify)	
3.	The source of compensation to be paid to me is:	
	☑ Debtor ☐ Other (specify)	
4.	☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:	

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

Case 17-09583 Doc 1 Filed 03/27/17 Entered 03/27/17 14:28:06 Desc Main Document Page 64 of 64

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

SERVICES REQUESTED AFTER DISCHARGE AND/OR DISMISSAL REPRESENTATION OF THE DEBTOR IN ADVERSARY PROCEEDINGS

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/25/2017 /s/ Kenneth S. Borcia

Date

Kenneth S. Borcia
Kenneth S. Borcia & Associates
1117 S. Milwaukee., Suite A-3

P.O. Box 447 Libertyville, IL 60048

Phone: (847) 634-8800 / Fax: (847) 634-8932

Bar No. 3125988